

LAKE DISTRICT FAMILY DENTISTRY

CARLTON, RICHTER & MANGUM

EPWORTH SLEEPINESS SCALE QUESTIONNAIRE

Be as truthful as possible.
Respond to each situation with a number in the third column.
Put your total at the bottom.

SITUATION	RESPONSE	SCORE
SITTING AND READING	0=would never doze 1=slight chance of dozing 2=moderate chance of dozing 3=high chance of dozing	
SITTING INACTIVE IN PUBLIC PLACE (ex: a theatre or movie)	0=would never doze 1=slight chance of dozing 2=moderate chance of dozing 3=high chance of dozing	
RIDING AS A PASSENGER FOR 1 HOUR OR MORE	0=would never doze 1=slight chance of dozing 2=moderate chance of dozing 3=high chance of dozing	
LYING DOWN TO REST IN THE AFTERNOON	0=would never doze 1=slight chance of dozing 2=moderate chance of dozing 3=high chance of dozing	
SITTING AND TALKING TO SOMEONE	0=would never doze 1=slight chance of dozing 2=moderate chance of dozing 3=high chance of dozing	
SITTING QUIETLY AFTER LUNCH (with no alcohol)	0=would never doze 1=slight chance of dozing 2=moderate chance of dozing 3=high chance of dozing	
IN A CAR WHILE STOPPED IN TRAFFIC	0=would never doze 1=slight chance of dozing 2=moderate chance of dozing 3=high chance of dozing	
TOTAL SCORE		

A score of 10 or more indicates a possible sleep disorder. Talk to one of our Doctors about your results.

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Changing Lives One Smile at a Time...